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ABSTRACT

During a workshop at the 1997 International Conference on Adventure Therapy, small groups shared and recorded their experience of personal challenges and impacts of wilderness work. This report summarizes those findings, reviews the literature on stresses and personal difficulties experienced by adventure therapists and other wilderness practitioners, and suggests some strategies to help such practitioners look after themselves and support each other. One of the strengths, but also a weakness, of outdoor professionals is "lifestyle investment"--a work situation in which boundaries between work and leisure are blurred. The work is intrinsically rewarding and consistent with personal values, but is also very draining and potentially destructive to other aspects of life. Therapists experience similar stresses and interpersonal impacts, and therapeutic work in wilderness settings could be expected to demonstrate substantially higher levels of both these effects. However, there is little relevant research on the short- or long-term effects of being a wilderness therapist. Workshop responses generated lists of intrapersonal and interpersonal difficulties experienced within and outside the work setting, as well as benefits experienced through wilderness work. Eight reasons are offered for why wilderness practitioners do not address these personal issues, and 10 individual and program strategies are suggested for sustaining the wilderness therapist. (Contains 12 references.) (SV)

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Sustaining the Wilderness Therapist

By Jenny Bunce

This paper was developed from a workshop presented at the First International Conference on adventure therapy, July 1997. During the workshop, small groups shared and recorded their experience of personal challenges in wilderness work. These findings have been incorporated in this report, as a contribution to the opening of this important topic for wider discussion. Ongoing research collaboration is planned by 30 people from 5 different countries.

Introduction

Much attention has rightly been given to documenting the power of wilderness programmes to make a difference in clients' lives, but what impact does this work have on leaders and therapists? Practitioners in the field typically have very high levels of motivation, energy, and commitment, but there can be significant personal costs involved, and the sustaining of wilderness therapists is emerging as an important issue.

In the pioneering phase of wilderness therapy, emphasis has been placed on the sharing of vision, experience, enthusiasm, and programming concepts. Theoretical literature has included inspirational writing and discussion on the underlying philosophy, theory, and rationale of therapeutic wilderness programming.

Practitioners have most often undertaken research into wilderness therapy, and most attention has been given to description of programmes and the gathering of outcome data for participants, as required for accountability and for seeking funding support. Overall, there appears to be comparatively little process research of any kind. And, understandably, the research has focussed almost entirely on the clients rather than leaders or therapists. There is an apparent total absence of published empirical research on the effects on leaders on participation in wilderness therapy.

However, as discussed by Jennifer Davis-Berman and Dene Berman (1994), there are now increasing calls to the professionalization of therapeutic wilderness programming. We now see vigorous debate on issues such as terminology, training, certification, standards, regulation, and ethics. But there has been very little discussion on some related professionalization issues for practitioners. What kinds of people are most suited to the practice of wilderness therapy? Is the long-term practice of wilderness therapy a viable proposition? Who is it viable for? What are the personal costs? How do the challenges

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differ from those facing mental health professionals in other settings, or those facing wilderness practitioners whose programmes are not offered as therapy? Do practitioners experience any personal costs balanced by the significant benefits? What are the real costs to programmes of high rates of burnout and staff turnover? What consequential risks for clients are involved? What policies and standards could help make the work sustainable? And what can we do to look after ourselves and support each other?

Informal conversation with practitioners and programme directors suggests that these questions do indeed have current relevance to wilderness therapy. This conclusion is supported by an important recent study by Simon Crisp who investigated selected innovative adolescent wilderness and adventure therapy programmes in the United Kingdom, United States of America, and New Zealand. In his report (Crisp, 1997) he refers to "the very high potential for staff burnout, and the need to build in, and allow for protective mechanisms against this" (p. 36).

Staffing is typically considered a crucial factor in wilderness therapy programmes, and yet there has so far been very little writing or research to provide a solid basis for considering questions of sustainability. In private, experienced practitioners share their concerns and their experiences, but in public there is silence.

Silence in public may be in part a result of the pioneering phase in which there is temptation to minimise costs and focus on the immediate short-term challenges of mounting new programmes, rather than the long-term consequences for individuals who provide the service.

However, a conspiracy of silence may also arise from our cultural, professional, and gender-based traditions, which make it difficult for professional helpers to look after themselves, acknowledge difficulties, or ask for support. For instance within a New Zealand context, self sufficiency had survival value for pioneers; and versatility and sustained competency is expected of trained professionals. The political voice may suggest getting out of the kitchen if you can't stand the heat; and looking after yourself may be seen as weak for men, and selfish for women.

But the consequences of therapists ignoring their own needs are serious for themselves, and for those they are working with. For this reason, regular supervision is a common requirement for continued registration of mental health professionals.

An important aim of the workshop was to break the silence, and provide a space for participants to reflect together on challenges they have experienced in undertaking therapeutic work in wilderness settings. Collectively, we might more easily overcome any cultural or professional barriers to discussion. By drawing on the experience and collective wisdom of people from diverse cultural, professional, and programme backgrounds, a beginning could be made on gathering more systematic information to help with planning of effective, sustainable, wilderness therapy programmes, and to provide a stronger base for needed further research. Such discussion should also help individuals identify potential long-term risks in their own situation, and consider possible strategies for counteracting them.

This paper summarises the challenges identified by participants, and provides an overview of some general principles and strategies, which may help us, look after ourselves, support each other, and sustain our wilderness work.

What's Your Problem?

City-bound, office-bound, classroom-bound, and homebound people may ridicule or minimise the costs involved in therapeutic work in wilderness settings, which are often associated with holidays and recreation. Furthermore, wilderness time may impose additional responsibilities on those at home and work. Thus, the challenges for wilderness therapists typically extend beyond the work itself, as is illustrated in the following story. [Note that this story is based on themes identified from interviews with practitioners, but does not itself relate to any actual person or programme.]

> John was looking forward to getting home. He had just finished an intensive 15 days with a group of adolescents referred from the justice system. The trip was particularly hard work, with several kids seemingly out to challenge everything and to get in the way of those who were really motivated. One of the vehicles broke down on the way out, and he finally arrived home several hours later than expected. His wife had already left to go out to a concert in which his youngest child was performing, and Justin, his 13-year-old son seemed more interested in the TV programme than in talking to John. The next day, Justin said to John, "You care more about the kids at work than you do about us."

The effects of wilderness therapy on intimate and family relationships are frequently raised in informal discussion. And yet we appear to lack any systematic investigation. In an address given in 1988, Michael Gass commented in passing that:

> We would probably be alarmed to see the results of a research study that examined the effects of our profession [adventure therapy] on the destruction of interpersonal relationships. (Gass, 1993, p. 420)

Almost ten years later, the effect of wilderness therapy on intimate relationships was explored by Scott MacNaughton (1997) in another workshop at the Perth Conference on adventure therapy, with the intriguing title of "Home from the woods and into the doghouse: Home and family issues for wilderness adventure therapists." Scott's presentation drew heavily from his personal experience, and he too pointed to the continuing absence of research on this important topic. More generally, there may be a problem in sustaining a balance in life between work and non-work.

In speaking to a conference on careers in outdoor education, Gass (1993) suggested that one of the strengths of outdoor programme professionals was "lifestyle investment". However, the strength was also seen as one of the weaknesses of outdoor programme professionals. "Lifestyle investment" describes a work situation in which the boundaries between work and leisure are blurred. The work is intrinsically rewarding, and consistent with personal values, but it is also very "draining" and potentially destructive to other aspects of life.

Similar conclusions can be drawn from research into experiences of therapists working in traditional settings in the United States of America. Both positive and negative outcomes are reported. Jeffrey Kottler has summarised research and presented his own work in a landmark book "On Being a Therapist" (1993). While many of the specific costs of being a therapist do not apply to wilderness work, some of the general findings

seem relevant. In these traditional settings it is found that almost all therapists experience times of burnout, and many find that their work impacts on family and/or intimate relationships. In the light of case studies and empirical research presented, it seems likely that therapeutic work in wilderness settings could be expected to demonstrate substantially higher levels of both these effects, since some contributing factors are much more evident, and some counteracting strategies are not available to wilderness practitioners. However, we may wish to leave open the question of relevance of Kottler's third general finding, that a majority of therapists admit to experienced disabling symptoms of depression or anxiety at some time in their professional careers.

Being a therapist also brings personal benefits, and both major personal benefits identified by Kottler seem relevant to wilderness therapy. Firstly, Kottler identifies the reward of the feeling that comes from "making a difference." In his own words, "the greatest kick I get is from the realisation that I said or did something, in isolation or as an accumulative effect, that made a difference to someone else" (p. 47). The basic concept of 'making a difference' is commonly heard from all kinds of therapists, and some wilderness therapists would also identify with Luks as quoted by Kottler:

> The joy we feel knowing that we have made a difference goes far beyond mere professional pride; sometimes this "helpers' high" creates an incredible surge of tranquillity, inner peace, and well being. (p. 46)

A second personal benefit of being a therapist is that of personal change and growth. Kottler illustrates this theme with a personal story, which also links to the power of wilderness experience.

> This process of change and growth works in mysterious ways. I had been working with a client who was exploring the utter predicability of her life. Even with success she felt stale, bored, restless, yet she was fearful of making an abrupt change that could take financial and emotional tolls. I squirmed a little, then a lot. I had just made plans to attend a professional conference I go to every year. I usually have a good time, meet some interesting people, and learn a few things I might try differently in my work. I heard my client elaborate further about her fear of taking risks. I felt even more like a hypocrite, berating her as I had for always taking the safe, predictable route. I did not even hear the last several minutes of the interview so caught up was I in reviewing the meticulous, controlled way I organize my life; even my vacations. When the session ended, I bolted for the phone.
>
> A month later, I returned from a snowcamping trip in the wilderness. This expedition, my alternative to a professional conference, gave me time to think about my life, its predictable routines, and several changes I might wish to initiate. My client, too, had changed during the interim - though she had no idea how her crisis had precipitated my own. As she related her determination to challenge her habitual patterns, I frequently nodded my head. I was nodding as much to myself as to her. (Kottler, 1993, p. xii)

Not only does wilderness therapy allow the opportunities for growth such as Kottler describes, but the work is taking place within a context which itself has long been associated with spiritual awareness, and personal growth and development. In the

wilderness there are fewer places to hide from ourselves. Gaps between our walk and our talk may become obvious, and our normal self-distracting activities may be unavailable.

Indeed, Kottler's experience supports the concept that wilderness programming could offer a valuable professional development opportunity for office bound therapists. But we still don't know whether the potential powerful rewards of being a wilderness therapist can, or do, outweigh the cumulative personal costs.

Overall, it seems clear that available research is inadequate to address our sustainability questions about wilderness therapy. We still lack any systematic data from which we can discuss the extent or the nature of the problem. We lack knowledge of either short or long-term effects of being a wilderness therapist, and we do not understand how these differ for different people, or for the same practitioner at different points in their professional career and personal life. And we have no collective knowledge about strategies, which might help to sustain wilderness therapists. The time has come to pool our experience.

Difficulties and Stressors

The necessary first step in sustaining the wilderness therapist is to identify difficulties and sources of stress experienced by individual practitioners. In the workshop, the focus was kept on short-term and process effects, with the explicit aim of exploring and honouring our differences, rather than aiming to identify commonalities. Since the time available was brief, and the work would be done in small groups, care was taken to structure the task to reduce the likelihood of inappropriate self-disclosure, while maintaining the focus on personal experience.

The focal question considered by the nine workshop groups was what are some aspects of working in wilderness therapy, which you have found difficult or stressful? The task was introduced by presenting 17 contrasting responses to this question taken from previous interviews with wilderness therapists, shown in Figure 1.

1. Having to function at night (larks) or in the morning (owls)
2. No time out for me for recreation.
3. Out of touch with home
4. Tensions with other leaders
5. Lack of privacy
6. Not enough adult time without kids around.
7. Language assault
8. Lack of self confidence in my skills and abilities
9. Weight of responsibility for troubled young people
10. Need for constant self control
11. Disruption to preferred personal routines
12. Coping with minor sickness e.g. flu
13. Coming down from trip "high"
14. Insufficient time for recuperation after time away
15. Sleep deprivation
16. Being caught in the tension between needs of individuals and needs of group
17. Difficulties in establishing and maintaining and nourishing intimate relationships outside work

Figure 1. Interview Examples of Difficulties Experienced in Wilderness Therapy.

Since most of the listed difficulties arose within the wilderness context, it was suggested that participants consider both internal and external difficulties and that, within these categories, distinctions are made between interpersonal and intrapersonal difficulties. Most groups chose to follow this suggestion, and recorded their responses in a 2 x 2 matrix. Figure 2 lists the difficulties recorded as internal to the work, while Figure 3 covers difficulties seen as external to the work. Responses from the nine groups have been brought together, but the basic data have been generally presented as received.

Intrapersonal:
Change in diet: white bread, cordial, eating times (can't eat when need to)
Having to operate within the same boundaries as the kids
Physical limitations, e.g. body weight, but still having to conform to same expectations
Hygiene, food preparation
Lack of completion with clients
Resentful of personal compromises
Coping with high/low peaks between programmes
Loss on a regular basis - loneliness
Shelf life
Impermanence of relationships
Constant highs _ lows
Lack of $ - relative to hours worked
The "extra backpack" (responsibility, actual physical extra work)
Being on call
Boredom from repeated trips
Copying maladaptive behaviours (coping)
Personal confidence
Feeling of loss re group
Can't control what happens ... uncertainty
Changing environment - no stability
Pressure to succeed - results, credibility
No debriefing for *you*!
Can't quit - stuck out there!
Being a sole female/male _ loneliness, scapegoat, insensitivity to perspective
Cerebral isolation
Working alone

Interpersonal:
Dealing with intense experiences. Who do we share these with?
Lack of contact with base team
Overintimacy/boundary issues - clients, co-leaders
Lack of empathy and support from boss - (behind desk)
Lack of support - agency, manager
Anxiety about healthy detachment vs. withdrawing and not caring
Having a willing listener whom understands
Lack of time out
Not a normal person in workplace (e.g. outdoor education teacher in school, chaplain)
Being a sole female/male _ loneliness, scapegoat, insensitivity to perspective

Other:
Lack of acknowledgment of needs
Having to sell and justify you and your programme

Figure 2. Difficulties Experienced within the Work Setting Identified by Workshop Participants.

Intrapersonal:
Shelf life
Lack of time to train in other interests (e.g. photography)
Lack of opportunity to withdraw into own space to rejuvenate
Lack of understanding from partners who also have their own needs
Developing same-gender relations
Developing relationships other than workmates
Lack of finances (salary)
Lack of support - friends, partner, family
Successful therapeutic relationships vs. unsuccessful personal relationships
Low pay
Dealing with responsibility
Difficulty in role switching, letting go of leadership, responsibility post-trip
Life on hold - can't deal with personal issues, and practical issues (e.g. bills, maintenance, etc.)

Interpersonal:
Making partners understand intense experiences facilitating this work
Choices made for other people
Loss of weekends - friends, families
Partner pressures at *their* work as a result of your work
Downplaying, discounting, lack of understanding demands of W.T.
Withdrawal from significant relationships by stress induced by working relationships
Having a willing listener whom understands
Tranquillity envy
Adapting to home
Devaluing of work by others
Significant others in the lives of co-workers - jealousy

Figure 3. Difficulties Experienced Outside the Work Setting Identified by Workshop Participants.

Benefits and Positive Effects

At this stage, no systematic data is available on the benefits experienced by wilderness therapists. However, some positive effects identified in interviews with practitioners and from the literature reviewed are noted in Figure 4.

1.Making a difference for clients
2.Wilderness experience
3.Time out from everyday pressures and concerns

4.No newspapers, phones, radio, TV, computers...
5.Back to basics
6.Personal growth, values clarification.
7.Balance of physical, emotional, intellectual, psychological, spiritual

Figure 4. Interview Examples of Benefits Experienced in Wilderness Therapy.

In problem-saturated contexts, it can be very easy to overlook the crucial significance of the "new-old story" (Hewson, 1991). However, educationists and therapists working from models such as behavioural, cognitive, narrative, and solution focussed approaches, remind us of the importance of exploring the resources, the positives and the strengths which co-exist with the problem. Thus, I suggest that the careful exploration and documentation of the benefits experienced in wilderness therapy could make a significant contribution to our discussion.

Barriers to Change

Wilderness practitioners seem easily able to reflect on difficulties, which are experienced in their work, and are often aware of associated long-term risks. We could confidently suggest that professionals involved typically have particularly high levels of personal maturity and interpersonal skills. And yet, it seems very difficult to address the issues, both within our work, and in the rest of our lives. What are some of the barriers to making changes?

Clearly, there is no available information on which to address the question of barriers. The following tentative suggestions are drawn from other kinds of professional contexts, and offered to open up discussion.

1. **Denial.** There is no problem, that will never happen to me, personal issues do not impact on work with clients, supervision is for students, and everything is under control.

2. **Fear and insecurity.** The fear of being exposed as personally or professionally inadequate is strong for many professional helpers, and the insecurity of many positions can feed this fear. Selling our programmes seems incompatible with attending to difficulties experienced by staff. Being sneaky in nature, fears can be particularly active in nighttime small hours, and produce sleep disturbance, which is itself, another source of stress. Insecurity, reduced self confidence, and low professional self-confidence, provide a shaky base for making changes.

3. **Security of the familiar.** It is possible that adventurers may be less affected by this factor than others, but there is a general tendency to stay with the familiar, to not "rock the boat", to choose 'the devil you know', to select reading material which validates our own views.

4. **Energy.** Seeking to make changes usually requires an investment of energy from both individuals and groups of people. At a time in which changes are necessary for the sustaining of therapists and programmes, energy levels may be already inadequate.

5. **Power and control issues.** Power struggles among field workers or management or wider systems may act as a barrier to change.

6. **Resources.** As "can do" and "make do" people, wilderness practitioners are typically creative and resourceful, but making changes necessary for sustainability may be greatly constrained by resource issues. If a successful pilot programme was run with

minimal resources, it might be very difficult to bring in the resources required to set up in a long-term sustainable way.

7. **Cultural, professional, and gender-based traditions.** Such traditions may make it harder for professional helpers to look after themselves, acknowledge difficulties, ask for support, take time-out, participate in re-creational activities, seek therapy, or even to engage in regular supervision.

8. **Client needs.** When working in therapeutic contexts, client needs are paramount. However, if we pay insufficient attention to the short-term and long-term needs of those providing the service, the work will be unsustainable.

Strategies for Sustaining the Wilderness Therapist

Workshop participants identified a variety of difficulties and sources of stress in their work, so we could expect specific sustaining strategies to show similar variation.

Strategies can be considered at the level of the programme, and at the level of the individual. For example, an interview with an experienced wilderness practitioner identified the following strategies:

At the programme level

- intensive pre-briefing time for leaders
- regular time out away from all other people during the work to allow for reflection and to keep perspective
- the right amount of variety in overall job description to maintain skills, but keeps balance and interest.

At the personal level

- maintain high level of physical fitness
- focus on reconnection with family after time away
- monitor overall balance - emotional, spiritual, physical, family

It is hoped that a further collaborative research project will bring together an extensive collection of strategies, which could act as a professional resource for those involved, and for others in the field. The workshop concluded with a presentation of some general approaches to sustaining the wilderness therapist.

While the focus is on the individual, there is considerable application to wilderness therapy programmes, and my suggestion is that programme staff and management could derive considerable benefit from exploring sustenance issues together, preferably with a facilitator. Note that the approaches described here are neither independent, nor mutually exclusive.

1. First things first. Stephen Covey together with Roger Merrill (1994) have produced an outstanding book entitled *First Things First*. Those with roots in experiential education or therapy, and hearts in the wilderness are not likely to need persuasion about the main message of this book. It provides an inspiring resource for our attempts to define what is truly important, and then to walk our talk.

Individual reflection can be further enhanced by discussion at home and with colleagues of the principles and strategies offered.

2. Training/ professional development. The demands on wilderness therapists are extremely, and sometimes unrealistically high. (Who else is expected to be professionally perfect 24 hours a day in isolated settings with an element of risk?). We need to develop the concept of a "good enough wilderness therapist" so we are not setting ourselves up for failing our clients or ourselves. It is hoped that current initiatives emerging from the Perth Conference will contribute to this important professional task.

However, because of the nature of the work, and the fact that no single training background is likely to provide the entire range of competencies required, ongoing training and professional development is a high priority for sustaining the wilderness therapist.

3. Team building. While most traditional therapy and much outdoor experiential and outdoor education is offered by a sole practitioner, wilderness work normally involves a team. Such teams may be small as partners working together in leadership roles in a stand-alone wilderness programme, or as complex as a large organization with rotating field-based staff, separate management and administrative structures, and interlocking programmes and services other than wilderness therapy. As is seen in Table 2, wilderness therapists may feel their work is not understood by others in their work setting, and that relationships with co-workers can be a source of stress. Regular timeout for facilitated team building could make a major contribution to such sources of stress.

4. Supervision. Within many therapeutic traditions, supervision is a key factor in the assurance of high quality services. It also provides a lifeline to sustain therapists and makes a significant contribution to professional development. Brigid Proctor labels these three major functions as formative, normative, and restorative (Proctor, 1994). Some of those working in wilderness settings have experienced the value of supervision, and some professional registrations held by wilderness therapists require ongoing supervision. However, other wilderness practitioners have not had personal experience or training in supervision, and furthermore, traditional models of supervision may not be the most appropriate for wilderness work. It is suggested here that supervision has the potential to address many of the issues involved in wilderness work, and a current research project exploring alternative models of supervision is in process.

5. Co-leadership and co-therapy. While relationships with co-workers can contribute to stress, participation in effective co-leadership and co-therapy relationships can be a rewarding experience leading to professional growth and development, and making a real contribution to sustaining the wilderness therapists involved. Roller and Nelson (1991) explore theory, research, and practice of co-therapy in a helpful book.

6. Contracts and job descriptions. In light of his conclusions relating to the high risk of burnout in the practice of wilderness and adventure therapy, Crisp (1997) recommends that administrators consider balancing the number of field days to non-field days, time off after long expeditions, and encouraging retention of staff by building career paths.

The negotiation of appropriate job descriptions and requirements would seem to be a key factor in the development of programmes that a sustainable in the longer term.

7. Self referral, seeking help. Because of the barriers identified above, it can be very difficult for professionals to ask for help. In many work places throughout the world, employers are discovering that employee assistance programmes are cost effective. We can all contribute to lowering the barriers by defining self-referral as an indication of professional strength rather than weakness.

8. Minding the body, mending the mind. Within the wilderness therapy fraternity, there is considerable knowledge and expertise in holistic approaches to wellbeing.

Amongst us are people with particular understanding of stress, relaxation, and fitness; of re-creation and recreation; of restorying, restoring, and new storying; of spiritual development and visioning. There are many helpful books and other resources available, e.g. Borysenko (1988) and Wilson (1995). What is our excuse for preaching what we do not practice?

9. Reaching out - professional support. The isolation of wilderness work can make the connecting with colleagues a particularly supporting and enriching experience. Attendance at conferences and workshops is a traditional avenue, but internet, phone, and Fax contacts can overcome barriers of time, money, and distance in linking with others. Joining specific or related professional groups is of great benefit and contributing to the development of the profession through such groups or in other ways, typically results in significant benefits to the individual.

10. Life beyond work. Because of the nature and the intensity of wilderness work, it is very easy to get badly out of balance, and put too many of our precious eggs in the workbasket.

Consider the nourishing of important relationships, the developing of roots in a community, the pursuit of unrelated interests and activities, and taking time to do nothing. Are these to be regarded as luxuries or a fundamental part of life? What quality of work will we carry out in the wilderness if our own lives are out of kilter? Covey and Merrill (1994) discuss four fundamental human needs - to live, to love, to learn, and to leave a legacy. Can wilderness work meet all four needs? If not, sustainability must include the arranging of wilderness work to make life beyond work possible.

Many of the workshop participants have chosen to be involved in further collaborative research relevant to sustaining the wilderness therapist. I believe that participation in action research is another powerful way in which we can address our sustainability issues in wilderness work, while at the same time, making a useful contribution to the evolving field of professional practice in wilderness therapy.

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